I claim:

1. A method for assessing aspirin resistance in a patient, said method comprising determining the concentration of a metabolite of thromboxane A2 in a sample of body fluid from the patient.

2. The method of claim 1, further comprising the step of comparing the concentration of metabolite in the sample to a predetermined set of concentration quartiles to determine within which quartile the sample falls and determining aspirin resistance based on the quartile of the sample.

3. A method according to claim 1 wherein a concentration of metabolite within the second, third or fourth quartile is indicative of an increased risk of a cardiovascular event.

4. A method for assessing risk of a cardiovascular event in a patient taking aspirin, said method comprising obtaining a sample of a biological fluid from the patient and determining the concentration of a thromboxane A2 metabolite in the sample wherein an increased concentration of the thromboxane A2 metabolite correlates with an increased risk of a cardiovascular event.

5. The method of claim 4, wherein said patient has arterial vascular disease.

6. The method of claim 4 wherein the concentration of the metabolite is determined using an immunoassay.

7. The method of claim 5 wherein the immunoassay is an ELISA, an RIA or a fluorimmunoassay.

8. The method of claim 4, wherein the biological fluid is urine.

9. The method of claim 4, wherein the thromboxane A2 metabolite is 11-dihydro thromboxane B2.

10. The method of claim 8, wherein a 11-dihydro thromboxane concentration less than 15.1 pg/mmol of creatinine is associated with a 10% risk of a cardiovascular event within 5 years.

11. The method of claim 8, wherein a 11-dihydro thromboxane concentration between 15.2 and 21.8 pg/mmol of creatinine is associated with a 13% risk of a cardiovascular event within 5 years.

12. The method of claim 8, wherein a 11-dihydro thromboxane concentration less than between 21.9 and 33.8 pg/mmol of creatinine is associated with a 15% risk of a cardiovascular event within 5 years.

13. The method of claim 8, wherein a 11-dihydro thromboxane concentration greater than 33.8 pg/mmol of

creatinine is associated with a 18% risk of a cardiovascular event within 5 years.

14. The method of claim 8, further comprising comparing the concentration of 11-dihydro thromboxane B2 in the sample to a predetermined set of concentration quartiles, determining which quartile the sample concentration falls within and providing a readout of the relative risk based on the quartile determination for the sample.

15. The method of claim 13, wherein the standardized quartile concentrations of 11-dihydro thromboxane B2 are: less than 15.1ng/mmol creatinine for the first quartile, 15.1 to 21.8 ng/mmol creatinine for the second quartile, 21.9 to 33.8 ng/mmol creatinine for the third quartile and greater than 33.8 ng/mmol creatinine for the fourth quarter.

16. The method of claim 14, wherein the risk of a cardiovascular event is 10% for a concentration within the first quartile, 13% for the second quartile, 15% for the third quartile and 18% for the fourth quartile.

17. A method of screening a patient for risk of having a cardiovascular event which comprises contacting a body fluid sample from the patient with an antibody which specifically binds to a thromboxane-A2 metabolite, determining the degree of immune complex formation by immunoassay, and assessing the patient's risk of a

cardiovascular event upon the basis of immune complex formation.